

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>SK</i>	<i>5C886</i>	<i>04-17-01</i>
RESPONSE FORMALITY REVIEW	<i>WAT</i>	<i>571</i>	<i>06/12/01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)..... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	7-30-01	SEJ
2	✓	8-20-01	SEJ
3	✓	4-7-02	SEJ
4	✓	10-10-02	SEJ
5	✓	3-29-03	SEJ
6	✓	7-8-03	SEJ
7	✓	5-13-04	SEJ
8	✓		
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50	✓		

Claim	Final	Original	Date
51	✓	7-30-01	SEJ
52	✓	8-20-01	SEJ
53	✓	4-7-02	SEJ
54	✓	10-10-02	SEJ
55	✓	3-29-03	SEJ
56	✓	7-8-03	SEJ
57	✓	5-13-04	SEJ
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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